1	Fo	the year Jan. 3-Dec. 31, 2005, or other tax year beginning. Your first harne and initial	Last name	uniu		Yeur s	ocial seconity number
See nstructions	4	DONALD J. 1 a joint return, spouse's first name and initial	Last name			Spous	e's scalal escurity member
n page 16.) lee the IRS	E.	HELANIJA Home address (number and street), If you have a P.O.	hov see nade 16.		Apt no.		You must enter
sbel. Itherwise,	HH	and a second a strategie				_	your SSN(s) above.
ologge priot or type:	Ē	City, town or post office, state, and 20 code. If you have a for				shans	se year tax or retund.
Presidential Election Com	palg	NEW YORK, NY 15022 Check here if you, or your spouse if file	ing jointly, want \$3 to go	to this fund (see	page 16)	The second second	You Spouse
Filing Stat	us	Single Married filing jointly (even if only one had is	ncome)	person is a	shild but not you	ir depend	ient, enter this child's
Check only		3 Married filling separately. Enter spouse's SS	SN above	name here. Qualifying w	idow(ar) with de	pendent	child (see page 17)
ane box.		ea x Yourself. If someone can claim you as a d	ependent, do not check box	The State of the S	- 114 - 128 PR (1144 PR 128 PR 1		South and 60 2
Exemption	15	a Dependente:	ran Depandentra social	(7) Depend	enr's	desid in the creat	on 85 who: a flyed with you a did not flye With
		(1) Fäst name Lagi name	SPEASIFY UNITED IN	yev	- 40	re 9494 19)	you due to divorce or separation (see page 20)
							Departments on he net entered above
it more than for dependents, see page 19.	ALC:						Add numbers on liket
265 hade 121		d Total number of exemptions claimed		The state of the s	rais: Stir. varible:	7	998 599
Income		Sa Taxable interest. Attach Schedule B if required		· FREEBRASS (119 MARIA III		62	9 460 371
Attach Form(S W-2 bere, Ala attach Forms	io.	b Tax-exempt interest. Do not include on line 8a 9a Ordinary dividends. Attach Schedule B if requir	red	.,	Leve-majornament	92	314,320
W-26 and 1069-R If tax		b Qualified dividends (see page 23)		96	6 299.	10	
was withheld.		11 Alimany received	THE S	C100100004445549400 151	***************************************	11	42 395 804
It you did not		12 Business income or (loss). Attach Schedule C 13 Capital gain or (loss). Attach Schedule D if req	pulred. If not required, check	bert Armin		13	32,185,116
get a W-2, see page 22.		14 Other gains or (issses). Attach Form 4797		b Taxable amount		154	
Enclose, but to		des Danctinos and acquibles 161		6 Taxable amount		16b	67 363 656
not attach, an payment. Also please use		17 Rental real estate, royalties, partnerships, S ct. 18 Farm income or (loss). Attach Schedule F	orporations, trusts, etc. Attai	OPRICED AND AND AND AND AND AND AND AND AND AN	1 p. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18	
Form 1040-V	F	18 Unemployment compensation	ran	b Taxable amount		18 20b	
		202 Social security benefits 202 202 21 Other income, List type and amount (see page				21	<103 .201 .247
		22 Add the amounts to the far right column for it	nes 7 through 21, This is so	ur total lacome	3 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	22	49 536 62
A allegades de		23 Educator expenses (see page 29)	edets, and top been personnent	23	-		
Adjusted Gross		26 Health savings account deduction. Attach For	m 8569	26		-	
Income		26 Moving expenses. Attach Form 3903		27	943.799		
		29 Self-employed SEP, SIMPLE, and qualited pl 29 Self-employed health insurance doduction (s					
		30 Penalty on early withdrawal of savings		30			
		31s. Alimony paid & Recipient's SSN >	440 erinika-pak - 6-10-00-runsa (4-4	32		7	
		33 Student loan Interest deduction (see page 33 Tuitium and fees deduction (see page 34)	3)	. 34			
		35 Comestic production activities deduction. At	gach Form 6903	35	1	35	943.75
510001 11-08-08		36 Add lines 23 through 31s and 32 through 33 37 Subtract line 36 from Ene 22. This is your as source, Privacy Act, and Paperwork Reduction	Siveled grous intome			37	48 552 62 Form 1040 (8)
Tax and Credits	38	NALD J. TRUMP & MELAN, A KNAVS. Amount from line 37 (adjusted gross income)			7		Page
Standard Deduction for		Wheater that before beneated it	The state of the s		h	38	48 592 825
e People who the checked any	- Au	Check You were born before January 2, if: Speuce was born before January	1941, 🔲 Blind.	Total baxes checked > 3		38	48 592 825
box on The 36s or 335 of who on be defined	_	If: Spouse was born before January If your spouse number on a separate cetum of you work dus	1941, Blind. 2. 1941, Blind. Blind. 3. 1941, Blind. 3. 1941, Blind. 3. 1941	Total baxes checked > 3	39a		
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	40	If: Speace was born before January If your speace nemizes on a separate return or you were a dus Itamized deductions (from Schadule A) or your state Subtract line 40 from line 36 If line 38 is over \$109,475, or you provided housing see page 37. Otherwise, multiply \$3,200 by the total	1941, Blind. 2 1941, Skind. 3 service attent see page 35 and 6 address of examptions claim	Total boxes checked > 3 nock here argin) urrleane Katrina, ned on line Gd	395	40	17 034 485
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** INTEREST NOT INCLUDED

** PENALTY NOT INCLUDED

\$6,864.